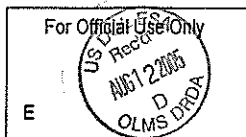


# FORM LM-30

## LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - <u>5461</u>	2. Fiscal Year Covered From: <u>1</u> / <u>1</u> / <u>04</u> Through: <u>12</u> / <u>31</u> / <u>04</u>
3. Name and address of person filing. Name <u>Donald S. Glenn</u> P.O. Box, Bldg., Room No., if any Street <u>2008 MERRITT AVE</u> City <u>BALTIMORE</u> State <u>MARYLAND</u> ZIP Code + 4 <u>21222</u>	4. Name, file number, and address of labor organization. Name <u>IRONWORKERS Local #16</u> Labor Organization File Number <u>011359</u> P.O. Box, Building and Room Number, if any Street <u>2008 MERRITT AVE</u> City <u>BALTIMORE</u> State <u>Md.</u> ZIP Code + 4 <u>21222</u>
5. Position in labor organization. <u>Business Manager / Financial Secretary Trustee - Health Pension, Annuity, Apprenticeship Training</u>	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	7.a. Nature of Interest, Transaction, or Income.  7.b. Amount.

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)

Signed

*[Signature]*

On

8-8-05

Date

410-284-4750

Telephone Number

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

## 8. Name and address of Business (including trade name, if any).

Name ARK Asset Management Co Inc  
 Trade Name, if any:   
 P.O. Box, Bldg., Room No., if any   
 Street 125 Broad St.  
 City NEW YORK  
 State NEW YORK ZIP Code + 4 10004

## 9. Business deals with:

- ☐ a. Labor Organization  
☒ b. Trust  
☐ c. Employer

## 10. If 9.b. or 9.c. is checked give trust or employer's name.

Name Ironworkers Local #16 Pension Fund  
 Trade Name, if any:   
 P.O. Box, Bldg., Room No., if any   
 Street 650 WAAPANS Rd.  
 City CLAYMONT  
 State DELAWARE ZIP Code + 4 19703

## 11.a. Nature of such dealing.

Fund Manager For Pension Fund  
Local 16

## 11.b. Approximate dollar value of such dealing.

## 12.a. Nature of interest held or income received.

3 Dinners Host By Ark Assets  
3/5/04 170.27  
6/3/04 177.18  
11/30/04 139.52

## 12.b. Amount.

486.97

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

## 13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name   
 Trade Name, if any:   
 P.O. Box, Bldg., Room No., if any   
 Street   
 City   
 State  ZIP Code + 4

## 14.a. Nature of payment.

13.b. Is the Business an Employer ☐ or Consultant ☐ ?

## 14.b. Amount of payment.

Name of Person Filing	File Number U-
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B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

<p>8. Name and address of Business (including trade name, if any).</p> <p>Name <input style="width: 90%;" type="text"/></p> <p>Trade Name, if any: <input style="width: 90%;" type="text"/></p> <p>P.O. Box, Bldg., Room No., if any <input style="width: 90%;" type="text"/></p> <p>Street <input style="width: 90%;" type="text"/></p> <p>City <input style="width: 90%;" type="text"/></p> <p>State <input style="width: 20%;" type="text"/> ZIP Code + 4 <input style="width: 20%;" type="text"/></p>	<p>9. Business deals with:</p> <p><input type="checkbox"/> a. Labor Organization</p> <p><input checked="" type="checkbox"/> b. Trust</p> <p><input type="checkbox"/> c. Employer</p>
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<p>10. If 9.b. or 9.c. is checked give trust or employer's name.</p> <p>Name <u>Ironworkers Local 416 Health &amp; Pension &amp; Annuity</u></p> <p>Trade Name, if any: <input style="width: 90%;" type="text"/></p> <p>P.O. Box, Bldg., Room No., if any <input style="width: 90%;" type="text"/></p> <p>Street <u>650 NATHAN'S Rd</u></p> <p>City <u>Claymont</u></p> <p>State <u>DELAWARE</u> ZIP Code + 4 <u>19703</u></p>	<p>11.a. Nature of such dealing.</p> <div style="border: 1px solid black; padding: 10px; margin: 5px;"> <p style="font-size: 1.2em;">REIMBURSED EXPENSE + CONFERENCE FEES</p> <p style="font-size: 1.2em;">TO ME AS TRUSTEE TO FUNDS</p> </div> <p>11.b. Approximate dollar value of such dealing. <input style="width: 150px;" type="text"/></p> <p>12.a. Nature of interest held or income received.</p> <div style="border: 1px solid black; padding: 10px; margin: 5px;"> <p style="font-size: 1.2em;">CONFERENCE FEES - 2,480.97</p> <p style="font-size: 1.2em;">EXPENSES - 2,243.94</p> </div> <p>12.b. Amount. <span style="float: right;"><u>4,724.91</u></span></p>
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